

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS263S	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/02/2009
NAME OF PROVIDER OR SUPPLIER HENDERSON HEALTHCARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 1180 E. LAKE MEAD DRIVE HENDERSON, NV 89015		
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Z 000	<p>Initial Comments</p> <p>Surveyor: 23119 This Statement of Deficiencies was generated as a result of complaint investigation conducted in your facility on 12/1/09 and finalized on 12/2/09, in accordance with Nevada Administrative Code, Chapter 449, Facilities for Skilled Nursing.</p> <p>Complaint #NV00023592 was substantiated with deficiencies cited. (See Tags Z230 and Z240). Complaint #NV00023618 was substantiated with no deficiencies cited. Complaint #NV00022957 was substantiated with no deficiencies cited. Complaint #NV00023684 was unsubstantiated. Complaint #NV00023365 was unsubstantiated.</p> <p>A Plan of Correction (POC) must be submitted. The POC must relate to the care of all patients and prevent such occurrences in the future. The intended completion dates and the mechanism(s) established to assure ongoing compliance must be included.</p> <p>Monitoring visits may be imposed to ensure on-going compliance with regulatory requirements.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p>	Z 000		
Z230 SS=G	<p>NAC 449.74469 Standards of Care</p> <p>A facility for skilled nursing shall provide to each patient in the facility the services and treatment that are necessary to attain and maintain the</p>	Z230		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Z230	<p>Continued From page 1</p> <p>patient's highest practicable physical, mental and psychosocial well-being, in accordance with the comprehensive assessment conducted pursuant to NAC 449.74433 and the plan of care developed pursuant to NAC 449.74439.</p> <p>This Regulation is not met as evidenced by: Surveyor: 23119 Based on record review, interview, and review of grievances the facility failed to ensure services necessary to maintain the resident's highest practicable physical, mental, and psychosocial well-being were provided for 1 of 8 residents (Resident #8).</p> <p>Findings include:</p> <p>Resident #8 was admitted to the facility 8/20/09 with diagnoses including acute respiratory failure, ventilator dependency, encephalopathy, and convulsions.</p> <p>Record review revealed Resident #8 was in a vegetative state and required total assistance with all of his activities of daily living (ADLs).</p> <p>On 12/1/09, Resident # 8's wife was interviewed. She reported she visited her husband on 11/7/09, after not having visited for two weeks. She reported her husband had not had his face washed or oral care. She reported she proceeded to begin to wash him when she noted he smelled. She reported his armpits were caked with dried powder and yeast smelling substance, his skin was dry and scaly and he had debris between his toes. She also reported she found three undated Scopolamine patches on him, one on each side of his neck, and one on his scapula. She informed the charge nurse, and continued to</p>	Z230			

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Z230	<p>Continued From page 2</p> <p>give her husband a bed bath. His back was filthy; Resident #8's wife provided the washcloth which was blackened with grime from cleaning her husband to the charge nurse.</p> <p>Review of Resident #8's record revealed an order for Scopolamine patches to be changed every 72 hours. Review of the medication administration record (MAR) revealed in October 2009, one patch was applied every three days. The site of the patches was not recorded. The November 2009 MAR documented the site of application of the patch beginning 11/6/09.</p> <p>Review of the facility's Grievance/Complaint report revealed on 11/8/09, four certified nursing assistants (CNA) received oral counseling for failing to give appropriate care to Resident #8. The documentation on the Grievance/Complaint report detailed Resident #8 was "found underarms with redness caked with powder, cream, between toes with dry scaly skin, not shaved, not showered (hair dirty). Scrub his back with wash cloth (white turned black). Found 3 patches Scopolamine, no dates. Bed linens filthy."</p> <p>Review of the CNA ADL tracking forms revealed Resident #8 received partial baths or bed baths on 10/1, 10/2, 10/4, 10/6, 10/8, 10/9, 10/11-10/13, 10/15-10/18 on the day shift. On the 2 PM - 10 PM shift, it was documented Resident #8 received partial baths or bed baths on 10/1, 10/3 - 10/18, 10/20- 10/22, 10/24-10/25, 10/27-10/31. For the month of November it was documented Resident #8 received a partial bath or a bed bath on 11/1-11/2, 11/4, 11/6 prior to his wife's visit on 11/7/09. For the month of November on the 2 PM to 10 PM shift it was documented Resident #8 did not receive either a</p>	Z230			

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Z230	Continued From page 3 partial bath or a bed bath prior to his wife's visit on 11/7/09. Review of the Lippincott Williams & Wilkins Nursing Drug Handbook revealed the instructions for removing the patch included to "discard patch after removing it and to wash application site thoroughly." Additionally, the Handbook cautioned to "possible withdrawal signs or symptoms (nausea, vomiting, headache, dizziness) when transdermal system is used longer than 72 hours." Severity: 3 Scope: 1	Z230		
Z240 SS=G	NAC 449.74471 Administration of drugs 1. A facility for skilled nursing shall not administer a drug to a patient in the facility: (a) In excessive doses, including duplicate drug therapy; (b) For an excessive duration; (c) Without monitoring the patient properly; (d) Without adequate indications for the use of the drug; or (e) If there are any adverse reactions which indicate that the dosage should be reduces or discontinued. This Regulation is not met as evidenced by: Surveyor: 23119 Based on interview and review of facility grievances the facility failed to ensure medications were applied appropriately for 1 of 8 residents (Resident #8). Findings include: Resident #8 was admitted to the facility 8/20/09 with diagnoses including acute respiratory failure, ventilator dependency, encephalopathy, and	Z240		

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Z240	<p>Continued From page 4</p> <p>convulsions.</p> <p>On 12/1/09, Resident # 8's wife was interviewed. She reported she found three undated Scopolamine patches on him, one on each side of his neck, and one on his scapula. She informed the charge nurse.</p> <p>Review of Resident #8's record revealed an order for Scopolamine patches to be changed every 72 hours. Review of the medication administration record (MAR) revealed in October 2009, one patch was applied every three days. The site of the patches was not recorded. The November 2009 MAR documented the site of application of the patch beginning 11/6/09.</p> <p>Review of the facility's Grievance/Complaint report revealed on 11/8/09, four certified nursing assistants (CNA) received an oral counseling for failing to give appropriate care to Resident #8. The documentation on the Grievance/Complaint report detailed on 11/7/09, Resident #8 was found with three undated Scopolamine patches on his body.</p> <p>Review of the Lippincott Williams & Wilkins Nursing Drug Handbook revealed the instructions for removing the patch included to "discard patch after removing it and to wash application site thoroughly." Additionally, the Handbook cautioned to "possible withdrawal signs or symptoms (nausea, vomiting, headache, dizziness) when transdermal system is used longer than 72 hours."</p> <p>On 12/1/09, the Assistant Director of Nurses was interviewed. She reported the facility policy for transdermal patches was to remove the old patch prior to putting a new patch on. She reported the</p>	Z240			

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Z240	Continued From page 5 policy was to chart the location of the application of the patch. Severity: 3 Scope: 1	Z240			

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